

APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

Title of Invention	METHOD AND SYSTEM FOR PRODUCING AN UPDATED AND RELIABLE HEALTH FORECAST GUIDE
Application Type :	regular, utility
Attorney Docket Number :	GEMS 0213 PA
Correspondence address:	
Customer Number:	27256
	
Inventors Information:	
<u>Inventor 1:</u>	
Applicant Authority Type:	Inventor
Citizenship:	US
Given Name:	DeAnn
Middle Name:	M.
Family Name:	Haas
Residence:	
City of Residence:	Germantown
State of Residence:	WI
Country of Residence:	US
Address-1 of Mailing Address:	W153 N9969 Neptune Drive
Address-2 of Mailing Address:	
City of Mailing Address:	Germantown
State of Mailing Address:	WI
Postal Code of Mailing Address:	53022
Country of Mailing Address:	US
Phone:	
Fax:	
E-mail:	
<u>Inventor 2:</u>	
Applicant Authority Type:	Inventor
Citizenship:	US
Given Name:	Bob
Middle Name:	L.

Family Name:	Beckett
Residence:	
City of Residence:	Waukesha
State of Residence:	WI
Country of Residence:	US
Address-1 of Mailing Address:	W299 N1049 St. James Way
Address-2 of Mailing Address:	
City of Mailing Address:	Waukesha
State of Mailing Address:	WI
Postal Code of Mailing Address:	53188
Country of Mailing Address:	US
Phone:	
Fax:	
E-mail:	

Inventor 3:

Applicant Authority Type:	Inventor
Citizenship:	IN
Given Name:	Priya
Family Name:	Gopinath
Residence:	
City of Residence:	North Arlington
State of Residence:	NJ
Country of Residence:	US
Address-1 of Mailing Address:	12K Garden Terrace
Address-2 of Mailing Address:	
City of Mailing Address:	North Arlington
State of Mailing Address:	NJ
Postal Code of Mailing Address:	53188
Country of Mailing Address:	US
Phone:	
Fax:	
E-mail:	

Attorney Information:

Name	Registration Number
Vincent C. Ilagan	53,053

Publication Information:

Suggested Figure for Publication - Figure 1
Suggested Classification -

Suggested Technology Center -
Total Number of Drawing Sheets -

Assignee 1:

Organization Name: GE Medical Systems Global Technology Company, LLC
Address-1 of Mailing Address: 3000 North Grandview Boulevard
Address-2 of Mailing Address:
City of Mailing Address: Waukesha
State of Mailing Address: WI
Postal Code of Mailing Address: 53188
Country of Mailing Address: US
Phone:
Fax:
E-mail: